


<b>Name of Policy</b> <b>Resident Evaluation</b> <b>Policy Number:</b> <b>3364-133-131</b> <b>Approving Officer:</b> <b>Senior Hospital Administrator</b> <b>Responsible Agent:</b> <b>Director of Pharmacy</b> <b>Scope:</b> <b>UT Department of Pharmacy</b>	 Effective date: 5/18/2022 Initial Effective Date: 8/2016
<input type="checkbox"/> New policy proposal	<input type="checkbox"/> Minor/technical revision of existing policy
<input type="checkbox"/> Major revision of existing policy	<input checked="" type="checkbox"/> Reaffirmation of existing policy

POLICY

To assure appropriate resident development an evaluation process will be followed by the residents and preceptors.

PURPOSE

To define the evaluation process and procedures for pharmacy residency programs and

PROCEDURE

Regular assessment is vital to the success of the resident and program in several ways:

- Ensuring that that the resident is meeting the defined goals and objectives to be a quality well-rounded practitioner.
- Providing the resident with opportunities for self-assessment and reflection for personal development and growth.
- Allowing for assessment of the preceptor and learning experience (by the resident) for continued growth and success of the program.

The assessment strategy will include three different types of evaluations:

1. Preceptor evaluation of residents’ attainment of educational goals and objectives.
2. Residents’ self-evaluation of their attainment of educational goals and objectives.
3. Residents’ evaluation of the preceptor and learning experience.

Evaluations are done using PharmAcademic software tools. Residents, preceptors, and residency program director (RPD) all have access to this system with a unique login and password. Experience objectives will be evaluated with the following scale:

Needs Improvement (NI)- Resident’s progress may not result in achievement of objectives

- Generally used during the instructing phase of resident development
  - For example: resident is able to identify drug-related problems <50% of the time and requires direct guidance toward solutions and recommendations.
- Must include narrative comment specifically addressing concern and a goal attainment strategy going forward

Satisfactory Progress (SP)- Resident’s progress is expected to result in achievement of objectives

- Generally used during the modeling/coaching phase of resident development
  - For example: resident is able to identify drug-related problems 50-80% of the time, and can produce some solutions and recommendations independently.

Achieved (ACH)- Resident’s performance meets what is expected of a PGY1 graduate of the residency program

- Generally reserved during the facilitation phase of resident development
  - For example: resident is able to identify drug-related problems >80% of the time, and can produce most solutions and recommendations independently.

- Must include narrative comment specifically addressing why the goal attainment criteria are scored as achieved

Achieved for Residency (AChR)- Resident's performance meets or exceeds what is expected of a PGY1 graduate of the residency program

- Generally reserved during facilitating phase of resident development
  - For example: resident is able to identify drug related problems >80% of the time and can produce an appropriate solution and recommendation for each. Resident has been evaluated on this objective before, and performance on this experience is consistent with past evaluation.
- Must include narrative comment specifically addressing why the goal attainment criteria are scored as achieved for residency
- Resident must have 'Achieved' the objective/goal at least once before you can 'Achieve for Residency'
- Subsequent rotations will not require preceptors to evaluate (but they still have the option)

Training videos for PharmAcademic use are available at <https://www.pharmacademic.com/Help.aspx>.

## **Types of Evaluations**

Summative evaluations are completed by the resident and preceptor for each rotation (monthly) and longitudinal experiences (quarterly or twice yearly). The components of this evaluation vary depending on the type of rotation and are based on overall program goals and objectives.

Learning Experience evaluations are completed by the resident to provide assessment of the overall learning opportunities provided by the rotation. The evaluation is evaluated by the preceptor as well as the RPD.

Preceptor evaluations are completed by the resident for any preceptor (rotation or longitudinal experience) to provide assessment of the role the preceptor throughout the experience being evaluated.

Custom evaluations are composed of questions developed/determined by the RPD or preceptor.

Snapshot evaluations are completed by the resident and preceptor at a specific time point to evaluate a specific experience within a rotation based on the preceptor and/or RPD.

A detailed assessment strategy table showing the evaluation category, tool, individual responsible, submission date, and the individual to whom the evaluation should be submitted can be found below.

## **Quarterly Development Plan**

The RPD and resident will meet quarterly to review the resident's interests, strengths, areas for improvement, and feedback to develop a residency schedule to facilitate successful completion of the program and an ideal learning experience to challenge the resident.

An evaluation of the residents' progress in achieving program's goals and objectives will be completed as part of the Developmental Plan. The RPD will review the resident's evaluations quarterly and add comments accordingly. The RPD will determine if program outcomes and goals are being achieved. The RPD will also consider residents self-evaluation and preceptor feedback to determine achievement of residency program goals for that quarter (Achieved for Residency status) .

RPD will review the Quarterly Development Plan with the resident at the end of each quarter. Residents will perform a self-assessment on their progress during the discussion with the RPD and updates to the developmental plan will be made based on the resident's self-assessment.

Adjustments to the first, second, and third quarter plans are made based upon review of the resident performance relevant to the previous quarter's plan:

- With input from preceptor(s) and residents;
- The identification of new strengths or areas for improvement,
- Changes in residents' short- or long-term career goals and interests.
- A quarterly resident review at RAC committee will be used as a mechanism by which adjustments to

the development plan will be made based on both formative and summative feedback.

- If there is no need for changes in the development plan, this is documented.
- Assessment information collected about a resident is a component of the development plan, but is not the plan itself.

**End of Residency Self-Evaluation**

At the end of the year, the resident will complete a Goal-Based Residency Self-Evaluation and Exit Interview

**Residency Evaluation Responsibilities**

Evaluation Type	Method of Evaluation	Frequency	Responsibility		
			Resident	Preceptor	RPD
<b>ROTATION</b>					
Rotation Midpoint	Narrative	During Rotation	X	X	
Formative	Snapshot	During Rotation	X	X	
Resident	RLS Outcomes, Goals & Objectives	End of Rotation	X	X	
Preceptor	Likert-scored questions with comments	End of Rotation	X		
<b>QUARTERLY</b>					
Longitudinal	RLS Outcomes, Goals & Objectives	Quarterly	X	X	
Residency Research Project	RLS Outcomes, Goals & Objectives	Quarterly	X	X	
Summary of Resident’s Progress (Quarterly Development Plan)	RLS Outcomes, Goals & Objectives	Quarterly	X		X
	Narrative (template lists the required contents)	Quarterly	X		X
<b>FINAL</b>					
Summary	Narrative and RLS Outcomes, Goals & Objectives	End of Program	X		X
Resident Exit interview			X		X

Approved by:  <u>/s/</u> Lindsey Eitnienar, PharmD, BCPS, AAHIVP Director of Pharmacy, Acute Care Services  <u>/s/</u> Russell Smith, PharmD, MBA, BCPS Senior Hospital Administrator  <i>Review/Revision Completed by:</i> <i>PGY1 Pharmacy Residency Program Director</i>	Reviewed: 5/2022
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